

B6F (Official Form 6F) (12/07)  
 In re **Jason L. Alexander**  
**Laura L. Alexander**

Case No. **09-38019-H1-13**  
 (if known)

**FIRST AMENDED 11/19/2009**

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>ACMI</b> <b>Attn: Birnamwood Fairfax HOA</b> <b>12603 Louetta Road, Suite 101</b> <b>Cypress, Texas 77429-5136</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Notice Only</b> REMARKS:				<b>Notice Only</b>
ACCT #: <b>ACS</b> <b>PO Box 7051</b> <b>Utica, NY 13504-7051</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Collecting for -PPSLC</b> REMARKS:				<b>Notice Only</b>
ACCT #: <b>xxxxA000</b> <b>Adonai Psychological Services</b> <b>Kevin J. Schloneger, PHD</b> <b>20615 Nannette Lane</b> <b>Spring, Texas 77388</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Medical/Dental</b> REMARKS:				<b>\$125.00</b>
ACCT #: <b>xxxxxx3692</b> <b>Afni, Inc.</b> <b>Attn: DP Recovery Support</b> <b>PO Box 3427</b> <b>Bloomington, IL 61702</b>	<b>C</b>	DATE INCURRED: <b>01/2009</b> CONSIDERATION: <b>Factoring Company Account</b> REMARKS:			<b>X</b>	<b>\$1,200.00</b>
ACCT #: <b>xxxxxx6878</b> <b>Afni, Inc.</b> <b>Attn: DP Recovery Support</b> <b>PO Box 3427</b> <b>Bloomington, IL 61702</b>	<b>C</b>	DATE INCURRED: <b>05/2006</b> CONSIDERATION: <b>Factoring Company Account</b> REMARKS:				<b>\$752.00</b>
ACCT #: <b>xxxxxxx92-02</b> <b>AFNI, Inc.</b> <b>404 Brock Drive</b> <b>Bloomington, IL 61702-3427</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Collecting for - T-Mobile</b> REMARKS:				<b>\$1,200.37</b>
<b>Subtotal &gt;</b>						<b>\$3,277.37</b>
<b>Total &gt;</b>						

(Use only on last page of the completed Schedule F.)  
 (Report also on Summary of Schedules and, if applicable, on the  
 Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re **Jason L. Alexander**  
**Laura L. Alexander**Case No. **09-38019-H1-13**  
(if known)**FIRST AMENDED 11/19/2009****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM.  IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>xxx0714</b> <b>Amsher Collection Serv</b> <b>600 Beacon Pkwy W Ste 30</b> <b>Birmingham, AL 35209</b>	<b>C</b>	DATE INCURRED: <b>09/2007</b> CONSIDERATION: <b>Collection Attorney</b> REMARKS:				<b>\$304.00</b>
ACCT #: <b>xxxx4943</b> <b>Asset Acceptance</b> <b>PO Box 2036</b> <b>Warren, MI 48090</b>	<b>C</b>	DATE INCURRED: <b>05/2008</b> CONSIDERATION: <b>Factoring Company Account</b> REMARKS:				<b>\$379.00</b>
ACCT #: <b>xxxxx2740</b> <b>At&amp;tconsvc</b> <b>At&amp;t Credit Manage</b> <b>Murray, UT 84157</b>	<b>C</b>	DATE INCURRED: <b>11/29/2004</b> CONSIDERATION: <b>Unknown Loan Type</b> REMARKS:				<b>\$80.00</b>
ACCT #: <b>Brian D. Williams</b> <b>Attorney at Law</b> <b>5519 Louetta Road, Suite B</b> <b>Houston, Texas 77379</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Notice Only</b> REMARKS:				<b>Notice Only</b>
ACCT #: <b>xxxxx6007</b> <b>Central Financial Control</b> <b>Attn: Bankruptcy</b> <b>PO Box 66044</b> <b>Anaheim, CA 92816</b>	<b>C</b>	DATE INCURRED: <b>06/2009</b> CONSIDERATION: <b>Collection Attorney</b> REMARKS:				<b>\$1,034.00</b>
ACCT #: <b>Central Financial Control</b> <b>PO Box 66044</b> <b>Anaheim, CA 92816-6044</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Collecting for - Houston Northwest Medical Center</b> REMARKS:				<b>Notice Only</b>

Sheet no. 1 of 7 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal &gt;

**\$1,797.00**

Total &gt;

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B6F (Official Form 6F) (12/07) - Cont.

In re **Jason L. Alexander**  
**Laura L. Alexander**Case No. **09-38019-H1-13**  
(if known)**FIRST AMENDED 11/19/2009****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>x0473</b> <b>Centrix Financial</b> <b>PO Box 17669</b> <b>Denver, CO 80217-0669</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Credit</b> REMARKS:				<b>\$4,290.00</b>
ACCT #: <b>xxx7301</b> <b>Centrix Resource Syste</b> <b>6782 Potomac St</b> <b>Centennial, CO 80112</b>	<b>C</b>	DATE INCURRED: <b>10/31/2003</b> CONSIDERATION: <b>Repossession</b> REMARKS:				<b>\$4,290.00</b>
ACCT #: <b>xxxxxxxx1000</b> <b>Chase Na</b>	<b>C</b>	DATE INCURRED: <b>12/01/2002</b> CONSIDERATION: <b>Credit Card</b> REMARKS:				<b>\$3,194.00</b>
ACCT #: <b>xxxxxx2357</b> <b>Conroe Regional Medical Center</b> <b>PO Box 538658</b> <b>Atlanta, GA 30353</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Medical/Dental</b> REMARKS:				<b>\$105.44</b>
ACCT #: <b>xx5316</b> <b>Cypress Creek EMS</b> <b>PO Box 3154</b> <b>Houston, Texas 77253-3154</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Medical/Dental</b> REMARKS:				<b>\$202.60</b>
ACCT #: <b>Elliot Heiniein &amp; Jones, P.C.</b> <b>PO Box 1446</b> <b>Crosby, Texas 77532</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Fees</b> REMARKS:				<b>\$5,786.00</b>

Sheet no. 2 of 7 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal &gt;

**\$17,868.04**

Total &gt;

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B6F (Official Form 6F) (12/07) - Cont.

In re **Jason L. Alexander**  
**Laura L. Alexander**Case No. **09-38019-H1-13**  
(if known)**FIRST AMENDED 11/19/2009****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>xxxxxx4941</b> <b>Farmers Svgs</b>	<b>C</b>	DATE INCURRED: <b>02/03/2003</b> CONSIDERATION: <b>Educational</b> REMARKS:				<b>\$1,038.00</b>
ACCT #: <b>xxxxxx4942</b> <b>Farmers Svgs</b>	<b>C</b>	DATE INCURRED: <b>02/03/2003</b> CONSIDERATION: <b>Educational</b> REMARKS:				<b>\$610.00</b>
ACCT #: <b>xxxx0919</b> <b>Harvard Collection Services, Inc.</b> <b>4839 N. Elston Avenue</b> <b>Chicago, IL 60630-2534</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Collecting for -Sprint</b> REMARKS:			<b>X</b>	<b>\$1,248.64</b>
ACCT #: <b>xxxxxx-xx6001</b> <b>Harvest Associates, Inc.</b> <b>1010 Spring Cypress Rd., Box 138</b> <b>Spring, Texas 77373-2503</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Collecting for - Houston Northwest Emerg.</b> REMARKS:				<b>Notice Only</b>
ACCT #: <b>xxxxxx4782</b> <b>Houston Northwest Emergency Specialist</b> <b>PO Box 202287</b> <b>Dallas, Texas 75320-2287</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Medical/Dental</b> REMARKS:				<b>\$130.00</b>
ACCT #: <b>xxxxxx8541</b> <b>Houston Northwest Medical Center</b> <b>File #849782</b> <b>Dallas, Texas 75284-9782</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Medical/Dental</b> REMARKS:				<b>\$1,034.71</b>

Sheet no. 3 of 7 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal &gt;

**\$4,061.35**

Total &gt;

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B6F (Official Form 6F) (12/07) - Cont.

In re **Jason L. Alexander**  
**Laura L. Alexander**Case No. **09-38019-H1-13**  
(if known)**FIRST AMENDED 11/19/2009****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>xxxx59A1</b> <b>Hudson &amp; Keyse Llc</b> <b>382 Blackbrook Rd</b> <b>Painesville, OH 44077</b>	<b>C</b>	DATE INCURRED: <b>12/2005</b> CONSIDERATION: <b>Collection Attorney</b> REMARKS:				<b>Notice Only</b>
ACCT #: <b>xxx9591</b> <b>Hudson Keyse</b> <b>382 Blackrock Rd</b> <b>Painesville, OH 44077</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Unknown Loan Type</b> REMARKS:				<b>Notice Only</b>
ACCT #: <b>xxxxxxxx7500</b> <b>Memorial Hermann Hospital</b> <b>PO Box 203197</b> <b>Houston, Texas 77216-3197</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Medical</b> REMARKS:				<b>\$1,000.43</b>
ACCT #: <b>Michael R. O'Neal</b> <b>12841 Jones Road, Suite 150</b> <b>Houston, Texas 77070</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Notice Only</b> REMARKS: <b>Attorney for Birnamwood Fairfax HOA</b>				<b>Notice Only</b>
ACCT #: <b>xxxx3092</b> <b>Nco Fin/09</b> <b>507 Prudential Rd</b> <b>Horsham, PA 19044</b>	<b>C</b>	DATE INCURRED: <b>01/2009</b> CONSIDERATION: <b>Collection Attorney</b> REMARKS:				<b>\$224.00</b>
ACCT #: <b>xxxxxxxx0761</b> <b>NCO Financial</b> <b>507 Prudential Road</b> <b>Horsham, PA 19044</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Collecting for - Reliant Energy</b> REMARKS:				<b>\$223.78</b>

Sheet no. 4 of 7 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal &gt;

**\$1,448.21**

Total &gt;

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B6F (Official Form 6F) (12/07) - Cont.

In re **Jason L. Alexander**  
**Laura L. Alexander**Case No. **09-38019-H1-13**  
(if known)**FIRST AMENDED 11/19/2009****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>xxx6443</b> <b>NCO Financial Systems</b> <b>507 Prudential Rd</b> <b>Horsham, PA 19044</b>	<b>C</b>	DATE INCURRED: <b>07/2005</b> CONSIDERATION: <b>Factoring Company Account</b> REMARKS:				<b>\$177.00</b>
ACCT #: <b>xx4001</b> <b>Partners Col</b> <b>403 Axminister</b> <b>Fenton, MO 63026</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Unknown Loan Type</b> REMARKS:				<b>\$644.00</b>
ACCT #: <b>Peak 5</b> <b>6782 S. Potomac St.</b> <b>Englewood, CO 80112</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Collecting for - Centrix Financial</b> REMARKS:				<b>Notice Only</b>
ACCT #: <b>Service Receivables Management</b> <b>3859 Battleground Ave., Suite 303</b> <b>Greensboro, NC 27410</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Collecting for - Sprint</b> REMARKS:			<b>X</b>	<b>\$177.11</b>
ACCT #: <b>xxx8037</b> <b>TeleRecovery</b> <b>PO Box 641090</b> <b>Kenner, LA 70064-1090</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Collecting for - West Calcasieu Cameron Hospital</b> REMARKS:				<b>\$44.99</b>
ACCT #: <b>x6435</b> <b>Treaschwig Veternary Clinic</b> <b>22732 Cypresswood Drive</b> <b>Spring, Texas 77373</b>	<b>C</b>	DATE INCURRED: CONSIDERATION: <b>Medical/Dental</b> REMARKS:				<b>\$94.50</b>

Sheet no. 5 of 7 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal &gt;

**\$1,137.60**

Total &gt;

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B6F (Official Form 6F) (12/07) - Cont.

In re **Jason L. Alexander**  
**Laura L. Alexander**Case No. **09-38019-H1-13**  
(if known)**FIRST AMENDED 11/19/2009****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxxxxx0001 Wells Fargo Attn: Collection Servicing, 1st Floor, M 1 Home Campus Des Moines, IA 50328	C	DATE INCURRED: 01/03/2006 CONSIDERATION: Educational REMARKS:				\$3,471.00
ACCT #: xxxxxxxxxxxx0003 Wells Fargo Attn: Collection Servicing, 1st Floor, M 1 Home Campus Des Moines, IA 50328	C	DATE INCURRED: 02/13/2006 CONSIDERATION: Educational REMARKS:				\$2,325.00
ACCT #: xxxxxxxxxxxx0002 Wells Fargo Attn: Collection Servicing, 1st Floor, M 1 Home Campus Des Moines, IA 50328	C	DATE INCURRED: 01/03/2006 CONSIDERATION: Educational REMARKS:				\$2,122.00
ACCT #: xxxxxxxxxxxx0004 Wells Fargo Attn: Collection Servicing, 1st Floor, M 1 Home Campus Des Moines, IA 50328	C	DATE INCURRED: 02/15/2006 CONSIDERATION: Educational REMARKS:				\$865.00
ACCT #: xxx1050 West Asset Attn: Bankruptcy P.O. box 105478 Atlanta, GA 30348	C	DATE INCURRED: 11/2008 CONSIDERATION: Collection Attorney REMARKS:				\$105.00
ACCT #: xxxxxx2357 West Asset Management PO Box 790113 St. Louis, MO 63179-0113	C	DATE INCURRED: CONSIDERATION: Collecting for - Conroe Regional REMARKS:				Notice Only

Sheet no. 6 of 7 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal &gt;

\$8,888.00

Total &gt;

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B6F (Official Form 6F) (12/07) - Cont.

In re **Jason L. Alexander**  
**Laura L. Alexander**Case No. **09-38019-H1-13**  
(if known)**FIRST AMENDED 11/19/2009****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxx5536 <b>West Calcasieu Cameron Hospital</b> <b>PO Box 2509</b> <b>Sulphur, LA 70664-2509</b>	C	DATE INCURRED: CONSIDERATION: <b>Medical/Dental</b> REMARKS:				<b>\$152.08</b>
ACCT #: <b>Whitehart</b> <b>Countryside Realty</b> <b>3610 Treaschwig</b> <b>Humble, Texas 77338</b>	C	DATE INCURRED: CONSIDERATION: <b>Lease Deficiency</b> REMARKS:				<b>Unknown</b>
ACCT #: <b>Internal Revenue Service</b> <b>P.O. Box 21126</b> <b>Philadelphia, PA 19114</b>		DATE INCURRED: CONSIDERATION: <b>Required Notification</b> REMARKS:				
ACCT #: <b>United States Trustee</b> <b>515 Rusk Street, Room 3516</b> <b>Houston, Texas 77002</b>		DATE INCURRED: CONSIDERATION: <b>Required Notification</b> REMARKS:				
Sheet no. <u>7</u> of <u>7</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal &gt;</b> <b>\$152.08</b>
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						<b>Total &gt;</b> <b>\$38,629.65</b>